

Hospital Careers: An Opportunity to Hire Veterans



American Hospital
Association®

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■ Introduction & Background

In August 2013, the American Hospital Association (AHA)

was asked to commit to the White House Joining Forces initiative to help hospitals not only become aware of the immense potential of veterans' skills, but also assist hospitals in recruiting and hiring veterans.

The AHA shared a commitment statement with the White House and all members (see Appendix A) on Veteran's Day 2013. The AHA was also asked to form and lead an advisory group in concurrence with the efforts of the Department of Health and Human Services (HHS), Health Resources and Services Administration (HRSA), the Department of Veterans Affairs (VA), the Department of Defense (DoD) and the Department of Labor (DoL); specifically their subgroup titled, "Enhancement of Veteran Hiring for Advanced Medical Occupations." The AHA formed this advisory group, which included federal liaisons from HRSA as well as the DoD (see Appendix B for complete list of members), and met regularly between May and November 2014 to develop this toolkit.

The advisory group was asked to focus on the Advanced Medical Occupations (AMOs), identified by the White House Joining Forces leadership team as Licensed Practical Nurses (LPNs), Registered Nurses (RNs), Nurse Practitioners (NPs) and Physician Assistants (PAs). See page 2 for a breakdown of the four AMOs, including education and licensure needed to practice.

ADVANCED MEDICAL OCCUPATIONS (AMO)

REGISTERED NURSE (RN)

An RN has graduated from a state-approved school of nursing, passed the NCLEX-RN Examination and is licensed by a state board of nursing to provide patient care.

LICENSED PRACTICAL/ VOCATIONAL NURSE (LPN/VN)

An LPN/VN has completed a state-approved practical or vocational nursing program, passed the NCLEX-PN Examination and is licensed by a state board of nursing to provide patient care. LPN/VNs normally work under the supervision of a registered nurse, advanced practice registered nurse or physician.

NURSE PRACTITIONER (NP)

An NP has completed a master's or doctoral degree program beyond their initial RN preparation and is nationally certified in a specialty area. NPs can prescribe medication and other treatments in all 50 states and the District of Columbia.

PHYSICIAN ASSISTANT (PA)

A PA has graduated from an accredited program and passed the Physician Assistant National Certifying Exam and is licensed by the state in which they wish to practice. They practice and prescribe medication in all 50 states, the District of Columbia and all U.S. territories with the exception of Puerto Rico.

Why Hire a Veteran?

Based upon anecdotal evidence from hospital and state hospital association leaders, veterans with the necessary AMO credentials and licensure to practice as an LPN, RN, NP or PA have no impediments to being hired. In fact, qualified veterans bring enhanced skills to the workplace. In the health care setting, many of these abilities are highly desirable principles and standards that correspond directly to a hospital or health system's own core values.

Veterans are:

- Proactive, committed leaders who can translate work and tasks to outcomes.
- Mission-driven.
- Financial managers, familiar with financial constraints and using all possible resources to capacity.

- Mentors.
- Adaptable and able to work under crisis conditions. They have mastered the art of disaster readiness.
- Experts in emergency service delivery in under-resourced environments – an invaluable resource for rural and critical access hospitals.
- Innovative.
- Problem solvers and strategic thinkers.
- Team-trained leaders. They enter civilian workplaces having worked in teams throughout their entire military service.

The graphic below depicts the narrative that hospital employers can focus on when looking to hire veterans.

Narrative of Veterans' Strengths



Sims, John D. "Changing the Conversation: Capitalizing on the Strengths of Veterans Here at Home." Georgetown University, McCourt School of Public Policy, Center for Public and Nonprofit Leadership. July 4, 2014.

Military Ranks and Enhanced Skills

To better understand how military ranks correspond with the enhanced skills list above, the following chart provides an example of Army ranks and corresponding leadership skills.

Military Rank	Experience	Enhanced Skills
Enlisted Soldier	Adoption of the Warrior Ethos, which compels soldiers to fight through all conditions to victory no matter how much effort is required.	The seven values that guide all soldiers and Army leaders are loyalty, duty, respect, selfless service, honor, integrity and personal courage.
COMPANY GRADE OFFICER		
Second Lieutenant, First Lieutenant, Captain	Must complete baccalaureate degree before being promoted to captain.	Training and leading individuals, teams, squads and platoons; solving problems; making rapid decisions; preparation of mentally agile and adaptable leaders
FIELD GRADE OFFICER		
Major	Considered for promotion to major in 9 th year of service.	Understand full-spectrum operations; know how to think, understand complex problem-solving, balance their focus between current and future operations and know how to adapt to changes in their environment
Lieutenant Colonel	Considered for promotion to lieutenant colonel in 16 th year of service.	Serve as senior leaders and managers; provide wisdom, experience, vision and mentorship
Colonel	Considered for promotion to colonel in 21 st year of service. Attaining the grade of colonel is realized by a select few and truly constitutes the elite of the officer corps.	Prepare selected leaders for responsibilities of strategic leadership; educate current and future leaders, engage in activities including conducting and publishing research to support strategic communication efforts

FM 6-22 - Army Leadership Competent, Confident, and Agile. (2006). Headquarters, Department of the Army, Washington, DC, 2006.

HOSPITAL HIRE: From Active Duty to ED

A 43-year-old PA, currently practicing in Minnesota served in the military for 24 years spending 12 of those years as a PA. He graduated from the Interservice PA Program at Fort Sam Houston with a Master's Degree in Physician Assistant Studies.

When retiring from the military, he was interested in moving back to his home state. He considered working at a VA medical facility but opted to work at the civilian hospital because it is a major trauma center and has a higher volume of emergency care than the VA facility. He is now the supervisor of emergency department (ED) PAs who provide medical services in his hospital, as well as several community hospitals affiliated with the hospital system. He supervises 20 full-time PAs and 11 per-diem PAs. He has been employed by the hospital for one year.

He was not sure what to expect in a civilian role and nervous about the transition to a civilian hospital. In the military, PAs operate with a lot of autonomy. He suspects that there was initial concern by his direct supervisor and coworkers because they did not know what to expect from a career military member. The hospital provided extensive onboarding during the first year of employment and continues to offer support to retain his services.

When asked what challenges there are in transitioning to a civilian hospital, the PA responded: "Developing strategies to deal with disciplining a civilian employee. Obviously, there are a different set of standards and a different tool set required to meet those challenges. Mentoring with other supervisors has been helpful. I do believe that the leadership experiences learned in the military transition well into a civilian hospital setting."

When asked to recommend "best practices" for civilian hospitals in recruiting and retaining PAs who are veterans, the PA responded that an effective onboarding program that covers the differences between military and civilian medical practices is key.

Another PA, now employed in southern California after serving 30 years in the military, said that the biggest hurdle in transitioning to a civilian hospital was the credentialing process, which took a lot longer than he had anticipated. Instead of looking at the military as a single position with lots of job sites, the hospital sought credentialing information from every site and clinic to which he had been assigned during his military career. His recommendation for civilian hospital "best practices" is to develop a fast track credentialing process for those coming from the military and to assign a mentor to the veteran.

How Hospitals Can Successfully Recruit, Hire and Retain Veterans

There is no doubt that hiring veterans within the AMOs is beneficial to both the employer and employed veteran.

For those hospitals that want to hire veterans but have not yet connected with community organizations to understand how many veterans in AMOs are seeking employment, there are important things to consider.

Transition Assistance Programs (TAP)

It is important to understand the kinds of transition assistance that are available for veterans, pre- and post-separation from the military.

Before a service member separates from military duty, there are resources available through the TAP sponsored by the DoD, DoL and VA. Within this program, there are a variety of programs and resources offered that employers should be aware of and more information can be accessed at: <https://www.dodtap.mil/campaign.html>

More specifically, each branch of the military has its own transition program. Listed below are the names of each service's TAP:

- **Army:** The Army has a robust "Soldier for Life" program to assist active duty soldiers and veterans with their military and civilian careers at <http://soldierforlife.army.mil>
- **Air Force:** Airman and Family Readiness Centers can be found using the military installation finder at: <http://www.militaryinstallations.dod.mil>
- **Navy:** Fleet and Family Support Center help Navy personnel schedule appointments with their Command Career Counselor for a pre-separation counseling interview as well as

the Navy CONSEP (Career Options and Skills Evaluation Program) self assessment as early as 180 days prior to separation. Details available at: <http://www.cnic.navy.mil>.

- **Marines:** The Marine Corps Career Resource Management Center and Transition & Employment Assistance Program Center provides resources for active duty and veteran marines. Details available at: <http://www.mccs-sc.com/support/crmc.asp>.
- **Coast Guard:** Worklife Division – Transition Assistance. Coast Guard Worklife staff provide transition assistance and are located at local Integrated Support Command locations. Details available at: <http://www.uscg.mil/worklife/>.

Many military bases also have programs. Below are two examples:

Joint Base Lewis-McChord TAP

<http://www.lewis-mcchord.army.mil/dhr/acap/>

Fort Sam Houston, Joint Base San Antonio TAP

<http://www.samhouston.army.mil/hra/acap.aspx>

Employer Best Practices

While numerous hospitals are successfully hiring veterans, two hospitals in Virginia are excellent models for active veteran hiring and outreach programs.

- **CHILDREN'S HOSPITAL OF THE KING'S DAUGHTERS (CHKD), NORFOLK, Va.**
 - Employs a full-time Human Resources (HR) staff member who works with the veteran community to engage veterans and ensure the veteran community is aware of all open hospital positions.

- This employee attends local job fairs; serves on the advisory board of the local Fleet and Family Service group (see link on page 10); tracks all veterans who are interviewed and/or hired by CHKD, and posts all open positions on the CHKD website and other sites targeting veterans and their families.
- The HR staff is working to develop a more robust onboarding program for newly hired veterans to ease the transition into a civilian workplace.

■ **BON SECOURS HEALTH SYSTEM, RICHMOND, Va.**

- Employs a retired colonel as vice president of military affairs and created a military affairs steering committee. The proactive, intentional approach allows them to track how many veterans are interviewed and hired. They also have partnered with the Jobs2Vets platform (<http://www.jobs2vets.com/>) for online applicant tracking.
- The CEO and senior leaders support the effort.
- Was the first health care system to join the Virginia Values Vets (V3) program in October 2012 (see link on this page for the V3 program).
- HR staff focuses internally on training hiring managers to better serve the needs of veterans and the Bon Secours system.
- Turnover is only 10 percent across the organization and Bon Secours provides facility-specific resource groups for veterans. The system is very family-friendly and has focused not only on employing the veteran but also the veteran's family members/spouses.

■ **THE VIRGINIA HOSPITAL AND HEALTHCARE ASSOCIATION (VHHA), RICHMOND, Va.**

- The VHHA has an active, state-based Troops to Healthcare program, part of the Virginia Values Veterans or "V3" program. <http://www.dvsv3.com/> Hospitals who register with the state of Virginia to be V3 certified can use this logo on their websites that identifies them as a veteran-friendly employer.



The Virginia Values Veterans (V3) Program is an official Commonwealth of Virginia, Department of Veterans Services Program. © 2014

- To be certified, an organization agrees to hire a specific number of veterans within a certain timeframe.

■ **AMAZON MILITARY TALENT RECRUITING**

- Amazon has been very successful in hiring and retaining veteran employees. Learn more about their recruitment strategy on their extensive website: <http://www.amazonfulfillmentcareers.com/opportunities/military/> .

Employer Checklist

Below is a checklist with key issues to consider as your facility develops its own veterans hiring program.

1. ASSESS YOUR NEEDS AND ESTABLISH THE BUSINESS CASE FOR HIRING VETERANS

- Support for hiring veterans must begin at the leadership level. Ensure all leaders are sharing this message of support with staff.
- Hiring veterans into your hospital or health care system must be based on an assessment of your workforce needs:

Do you know what your current and future needs are?

Do you understand how retirements or turnover are impacting your hiring decisions?

HOW-TO TIP: The AHA Workforce Center, the American Society of Health Care Human Resources Administration (ASHHRA) and the American Organization of Nurse Executives (AONE) developed a health care workforce assessment tool in 2013 that gives hospitals an opportunity to assess workforce needs in great detail. While not specifically aimed at veteran hires, the tool provides an opportunity to survey all workforce needs - the true starting point for developing and understanding how and why veterans could fill current and future positions. The toolkit can be accessed at www.aha.org/workforce under AHA resources.

- Though hiring veterans can have a very “feel good” tone, there is value beyond that which a hospital or health care system needs to explore. Bon Secours Health System established its veteran hiring program because it was a sound business decision based on the location of their hospitals and their workforce needs.

- Rural hospitals, in particular, have needs that hospitals in suburban or urban communities do not face, particularly primary care physician shortages that could be alleviated by veterans in the AMOs.

2. HIRING VETERANS

- Hospitals must understand the veteran population within their community, especially how and when to recruit.
- Hospitals need to be proactive in their approach to hiring veterans. They need to connect locally with community entities serving veterans and become known as an employer of veterans.

HOW-TO TIP: See pages 9-10 for some of the many community groups that serve veterans.

3. ONBOARDING VETERANS

- Helping a newly hired veteran adjust to a civilian work environment is one of the big challenges to onboarding and retaining them. In the military, service members are accustomed to seeking assistance from a sponsor or mentor who is assigned to help them navigate military life.

HOW-TO TIP: A hospital should link a newly-hired veteran with a sponsor at the hospital. Ideally, the sponsor would be another veteran who can help the newly hired veteran navigate the new environment and assist with translating the veteran's skills to the hospital's needs, expectations and competencies of the particular position, even day-to-day issues if the new veteran has recently moved. Many hospitals can provide this type of support through an already existing employee assistance program (EAP). Such a proactive approach emphasizes the hospital's commitment to the veteran community.

4. PROVIDING ONGOING SUPPORT TO VETERAN EMPLOYEES

- Veterans are familiar with military ranks, but those do not approach the complexity of hierarchy in a civilian health care system. One of the enhanced skills veterans bring to the workplace is team orientation. Military recruits are trained in teams and understand that teamwork is “how it’s done.” However, navigating the civilian hierarchy of positions can be an alien concept to a veteran.
- Veterans are searching for stability, and if the work environment is ready to successfully hire veterans, then the hospital retention rate could be positively impacted.
- HR staff must be ready to provide resources and ongoing support for veteran employees, including information about education bridge programs for veterans seeking to advance professionally.

HOW-TO TIP: A selection of current bridge programs is included on pages 12-13.

How Hospitals Can Link with the Veteran Community

It is essential that hospitals understand the veterans in their community and be connected as an employer for veterans. Below is a short list of community organizations (local, state-based, national) that serve veteran and veteran family needs and should be on every hospital and health system’s list of possible partners.

AMERICAN JOB CENTERS

American Job Centers is a network providing a single access point, open 24-7, for key federal programs and critical local resources to help people find a job, identify training programs and tap into resources to gain skills in growing industries. This site and the nearly 3,000 federally funded brick-and-mortar employment centers that are part of the American Job Center Network provide an easily identifiable source for the help and services individuals and businesses need. This project is supported by the DoL and many other government entities.

Click here to find your local employment center:
<http://www.servicelocator.org/onestopcenters.asp>.

AMERICAN LEGION

Focusing on service to veterans, service members and communities, The American Legion has about 2.4 million members and 14,000 posts worldwide. To find a local post, click on the “Find a Post” button on the top right corner of the website <http://www.legion.org/>. Fill in your city, state and zip code to receive a list of local posts in your community.

AUGUSTA WARRIOR PROJECT

The Augusta Warrior Project is an Augusta, Ga.-based, non-profit organization with the mission to provide warriors (veterans/currently serving) and their families a model advocacy program in order to enhance their quality of life and capitalize on the Augusta region's ability to contribute to the warriors and their families. The model is based on staff advocates developing a proactive relationship with warriors in order to prevent or mitigate life crises by holistically addressing issues early and collectively with community partners. Click here for more: www.augustawarriorproject.org.

BLUE STAR FAMILIES

Blue Star Families was formed in April 2009 by a group of military spouses to create a platform where military family members can join with civilian communities and leaders to address the challenges of military life. Blue Star Families includes active duty, National Guard, Reserve, wounded, transitioning service members and their families from all ranks and services, as well as veterans and civilians. Click here for more: <http://www.bluestarfam.org/>.

FLEET AND FAMILY SERVICES

Fleet and Family Support Programs support individual and family readiness through a full array of programs and resources that help Navy families to be resilient, well informed and adaptable to the Navy environment. Programs and services are currently delivered from 81 sites worldwide, with 58 of those sites delivering a full portfolio of programs and services. Find your local Fleet and Family Support Center here: http://www.cnic.navy.mil/ffr/family_readiness/fleet_and_family_support_program.html.

NATIONAL RESOURCE DIRECTORY

The National Resource Directory (NRD) is a partnership among the DoD, DOL and VA. NRD information is from federal, state and local government agencies; veteran and military service organizations; non-profit and community-based organizations; academic institutions and professional associations that provide assistance to wounded warriors and their families. Click here for more: <https://www.ebenefits.va.gov/ebenefits/nrd>.

UNITE US

Unite US is a free platform connecting current military service members, veterans and their families to transformative resources and opportunities in their local communities. These opportunities include networking outlets with veterans' organizations, peers and civilian supporters. With its interactive, proximity-mapping technology, Unite US members and organizations are able to capitalize on assets within their immediate and national community and nurture seamless solutions for current and former military service members. Click here for more: www.Uniteus.com.

U.S. DEPARTMENT OF VETERANS AFFAIRS

The VA runs a national network of State Veterans Affairs Offices that offer local resources to veterans. To find your State Veterans Affairs Office, click here: <http://www.va.gov/statedva.htm>.

IV. Veterans Not Yet Credentialed or Licensed to Practice as LPNs, RNs, NPs and PAs

According to the DoD, 10,635 enlisted service members who served in a military health care support capacity separated from the military in 2013.

This includes just over 6,307 medics and hospital corpsmen with the remainder having served in other military health care support occupations, including medical laboratory technician, surgical technologist, pharmacy technologist and medical assistant. (Source: Defense Manpower Data Center (DMDC) data on military service strength and separations for FY 2013.)

The opportunity for these veterans, even those without any medical background, to be hired into the four AMOs is great. From the employer perspective, such veterans bring a wealth of knowledge and experience that can be capitalized upon through education programs that allow veterans to earn credit for military

service and to complete education needed for appropriate licensure. The White House Joining Forces initiative has convened another advisory group, much like the AHA's, to examine veteran education, credentialing and licensing post-military separation. It also is reviewing how best to streamline education programs for veterans who are seeking to enhance and build upon the skills and knowledge they gained while in the service. As soon as a report is available it will be posted on www.aha.org/hiringveterans

The critical question is: How does a veteran connect with the proper educational track that will enable him/her to be educated, licensed and hired, taking into consideration the varying levels of experience veterans may have? By connecting with veterans in the community, the hospital becomes not only an employer of choice, but also a resource for those interested in health care careers in the near future. To support veterans in

HOSPITAL HIRE: From Active Duty to Patient “Coach”

Scottsdale Lincoln Physician Network, part of the John C. Lincoln Accountable Care Organization in Arizona, has begun a program to hire veterans as patient transition coaches in order to lower readmissions.

The health system connected with local veteran organizations and asked that former hospital corpsmen and/or combat medics participate in the program. In September 2012, they started with two veterans and, after the initial success, spent time refining and building out the program, raising \$780,000 to date from community groups to fund it. Within months, their readmission rate went from 21 percent to six percent. Currently, there are 14 transition coaches who work from a list of Medicare patients as well as hospitalist/nurse orders for visits. Visits are conducted early in the admission so the transition coach gets to know the patient and helps them get ready for their transition needs. The day after discharge, they visit the patient at home and do a variety

of services from health checks to scheduling home health visits, to doing the dishes and moving or rearranging furniture to minimize falls. Furthermore, they do a social work assessment for additional services that might be needed. A transition services record in the electronic health record enables all clinicians to see their notes.

The coaches are highly motivated and have initiated programs with the pharmacy assistants to ensure patients can read their medication bottles (enlarging text as needed). As part of the program, all coaches are enrolled in college degree programs and most are pursuing clinical/health care positions. The program is co-led by a physician leader who reviews cases and provides focused supervision and a retired Air Force colonel administrator who provides an understanding of the specialists' military background. Click here to view a video of their program: <https://www.youtube.com/watch?v=lks2WGEiEbo>.

the community, the hospital needs to know about the variety of programs available to veterans to begin or build upon their medical education, thereby creating a pipeline of potential employees once veterans' education is completed.

Resources

Below is a list of resources and some choice programs that are being piloted or have met with success in affording qualified veterans education opportunities. By having this information on hand, you expand your knowledge and resources for veterans in your community.

Fact: The GI Bill offers veterans or veteran family members the opportunity for 36 months of paid education benefits.

- The National Council of State Boards of Nursing (NCSBN) developed a crosswalk between military health care occupation curricula with a standard LPN curriculum. *NCSBN Analysis: A Comparison of Selected Military Health Care Occupation Curricula with a Standard Licensed Practical/Vocational Nurse Curriculum*
<https://www.ncsbn.org>
- College Credit for Heroes is a partnership between the Texas Workforce Commission and the Texas Higher Education Coordinating Board to ensure that active duty, former and retired military personnel receive the credit they earned for their service to our country.
<https://www.collegecreditforheroes.org/>

- Credentialing Opportunities On-Line (COOL) websites: All four military services now have COOL websites, with the sites for the Air Force and Marine Corps recently joining the Army and Navy sites. COOL assists service members and veterans to identify civilian occupations that correspond to their military specialties, to identify the certifications and licenses that are related to any civilian occupation as well as the requirements to attain those credentials. COOL also has great information about credentialing in general, including why it can be important to a veteran and what resources are available to help pay for training and testing. <https://www.cool.army.mil/> and <https://www.cool.navy.mil> and <https://afvec.langley.af.mil/afvec/Home.aspx> and <https://www.cool.navy.mil/usmc/>

Current Efforts Underway to Establish Education Bridge Programs for Veterans

- Texas A&M University, Corpus Christi, the College of Nursing and Health Sciences (CONHS) offers the eLine Military program (ELM) to residents of Texas who are members of the military or veterans with previous medical experience. The focus of the program is minority students who are underrepresented in the field of nursing, rural students and/or those who are from disadvantaged backgrounds. Eligible program participants are able to access distance learning technologies (laptop provided) to earn a BSN, be eligible to take the NCLEX, become an RN and enter the health care workforce. http://elinemilitary.tamucc.edu/?doing_wp_cron=141271
- HRSA is funding 20 schools of nursing in a pilot program to assist veterans in attaining their Bachelor of Science in nursing. The Veterans Bachelor of Science in Nursing (VBSN) program awards are made to colleges and schools of

nursing in order to modify their BSN programs, make them veteran-friendly, provide support services, award academic credit for prior health care and other relevant experience/training gained while enlisted and increase the number of veterans they plan to enroll, retain and graduate from their BSN programs. The first grants were awarded in 2013 to nine schools and an additional 10 schools just received funding and will begin their work in 2015.

For a list of the grantees and more information about this program, please visit

<http://bhw.hrsa.gov/veterans/nurses.html>.

- HRSA also has invested in physician assistant training programs for veterans. In 2010 and 2011, HRSA awarded 57 new grants that will invest \$45 million by 2016 to help accredited physician assistant education programs introduce new quality curricula. Seven of these grantees have enhanced recruitment, retention and/or mentoring services for veterans and 23 are located within 100 miles of a military base. In 2012, HRSA awarded 13 new grants to accredited physician assistant education programs. Eleven of the new grant awards have recruitment, retention and mentoring activities targeting veterans. Many have relationships with regional military and/or veteran facilities, use Veterans Affairs community assessment data and provide student clinical experiences at military or veterans' hospitals and clinics. For additional details, please visit <http://bhw.hrsa.gov/veterans/physicianassistants.html>.

- The National Governor's Association (NGA) Center for Best Practices is working with the DOL and six states that received grants in 2013 to expedite licensure pathways for veterans with relevant military service. All six policy academy states – Illinois, Iowa, Minnesota, Nevada, Virginia and Wisconsin – chose LPN as one of five occupations on which to focus their efforts. Efforts and successes include:

- **Illinois, Nevada and Virginia** are in the process of developing bridge programs similar to a model program **Arizona** has developed based on the NCSBN analysis (see page 12).
- **Wisconsin** has identified an existing program at Herzing University that allows experienced emergency medical technicians (EMT) including military medics to complete an eight week transition course and then either take the LPN exam or continue on for two additional semesters to obtain an Associate of Science in Nursing and be eligible to sit for the National Council Licensure Examination for Registered Nurses (NCLEX-RN). A final report on this project will be available in mid-2015 from NGA.

All of these examples demonstrate the importance of partnerships between hospitals and the community. Many of these partnerships link academia and employers, and underscore that in order to benefit veterans, none of the outreach and development of pathways can be done in isolation.

V. Other resources

- The American Society for Healthcare Human Resources Administration (ASHHRA) is an AHA subsidiary www.ashhra.org
- America's Heroes at Work – Veterans Hiring Toolkit from the Department of Labor <http://www.dol.gov/vets/ahaw/>
- American Council on Education (ACE) Toolkit for Veteran Friendly Institutions <https://vetfriendlytoolkit.acenet.edu/Pages/default.aspx>
- Chamber of Commerce Foundation Hiring Our Heroes program <http://www.uschamberfoundation.org/hiring-our-heroes>
- Military Officers Association of America <http://www.moaa.org/>
- U.S. DoL new female veterans employment site <http://www.dol.gov/vets/womenveterans/>
- White House Joining Forces initiative <http://www.whitehouse.gov/joiningforces>

We want to hear from you!

If you have an established veterans hiring program in your hospital or health system, or if you are a veteran who has been successfully recruited and hired by a hospital/health system, please send an email to vriley@aha.org with your contact information and a short description.

The AHA is committed to continue to help our members recruit and hire veterans in all health care professions.

Appendix A

AHA COMMITMENT STATEMENT

On behalf of our nearly 5,000 member hospitals, health systems and other health care organizations, and our 43,000 individual members, the American Hospital Association (AHA) is pleased to commit its support for the White House Joining Forces initiative and to assist its members in understanding the importance and value of hiring United States veterans. This initiative complements AHA's strategy of supporting member efforts to recruit, hire and retain a strong and committed workforce.

The AHA will support this initiative in the following three ways:

- 1.** We will convene stakeholders whose input is vital to creating a coordinated and collaborative framework for hiring veterans.
- 2.** We will communicate our commitment and strategies to AHA members, subsidiaries and personal membership groups, and to state and metropolitan hospital associations, and ask them to support and participate in the hiring of veterans in whatever way they are able.
- 3.** We will broker our resources to connect hospitals with organizations whose expertise in veteran's employment can strengthen individual hospital efforts, such as the Department of Defense transition office, state and local veterans employment and training offices, state licensing and accreditation bodies, and other stakeholders with whom hospitals can collaborate.

Appendix B

AHA ADVISORY GROUP: ENHANCEMENT OF VETERAN HIRING FOR ADVANCED MEDICAL OCCUPATIONS

Kathy Apple

Executive Director
National Council of
State Boards of Nursing
Chicago, IL

Elisa Arespachoga

*Director, Physician
Leadership Forum*
American Hospital Association
Chicago, IL

Dick Bohrer

Director, Network Relations
National Association of
Community Health Centers
Bethesda, MD

Ed Davin

Principal Analyst
Solutions for Information
Design, LLC
Fairfax Station, VA

Bethany Hamilton, J.D.

*Program Specialist,
Community HealthCorps®*
National Association of
Community Health Centers
Bethesda, MD

Sandy Harding

Senior Director, Federal Advocacy
American Academy of Physician
Assistants
Alexandria, VA

Elizabeth Lietz

*Associate Director,
Media Relations*
American Hospital Association
Washington, DC

Jim Lorraine

Executive Director
Augusta Warrior Project
Augusta, GA

Maureen O'Keeffe

*Vice President & Chief Human
Resource Officer*
St. Luke's Health System
Boise, ID

William Dean Rasco, FACHE

Col., USAF, MSC, (Ret)
*Member Relations Consultant,
Federal Health Care Section*
American Hospital Association
San Antonio, TX

Veronika Riley

*Senior Director,
Workforce Center*
American Hospital Association
Washington, DC

John Supplitt

*Senior Director,
AHA Constituency Sections*
American Hospital Association
Chicago, IL

Debra Swan

*Associate Vice President of
Federal Government Affairs*
American Association of Nurse
Practitioners
Alexandria, VA

Pamela A. Thompson, MS, RN, CENP, FAAN

*Senior Vice President, Nursing,
AHA*
Chief Executive Officer, AONE
Washington, DC

Debi Tucker

Director, State Issues Forum
American Hospital Association
Washington, DC

Federal Liaisons:

Marion Cain

*Associate Director, Force
Readiness & Training*
*Deputy Assistant Secretary of
Defense (Readiness)*
The Pentagon, Washington, DC

CDR Gregory Davis

Senior International Health Officer
Office of Global Health Affairs
Bureau of Health Workforce
Health Resources and Services
Administration
Rockville, MD

Kerry Paige Nessler, RN, MS RADM, USPHS

Assistant Surgeon General
*Director, Office of Global
Health Affairs*
Bureau of Health Workforce
Health Resources and Services
Administration
Department of Health
and Human Services
Rockville, MD

LTC Paula T. Smith, PT, DPT

*Office of the Chief of Staff
of the Army*
Soldier for Life Program,
Health Director
Arlington, VA